

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 1  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Mississippi Conservatives</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00554774	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Madison County Journal</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 30 / 2014</b>		
Mailing Address <b>PO Box 219</b>			Amount <b>1584.45</b>		
City <b>Ridgeland</b>	State <b>MS</b>	Zip Code <b>39158</b>	Transaction ID : <b>SE.4935</b>		
Purpose of Expenditure <b>Newspaper Advertisement</b>		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 27 / 2014</b>		
Name of Federal Candidate <b>Thad Cochran</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>MS</b>		
Calendar Year-To-Date Per Election for Office Sought <b>4467.18</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>Magee Courier</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 30 / 2014</b>		
Mailing Address <b>206 Main Avenue North</b>			Amount <b>653.40</b>		
City <b>Magee</b>	State <b>MS</b>	Zip Code <b>39111</b>	Transaction ID : <b>SE.4936</b>		
Purpose of Expenditure <b>Newspaper Advertisement</b>		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 27 / 2014</b>		
Name of Federal Candidate <b>Thad Cochran</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>MS</b>		
Calendar Year-To-Date Per Election for Office Sought <b>5120.58</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>2237.85</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	<b>2237.85</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Brian Perry

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 27 / 2014**

Signature